

<b>CLAIMS ONLY</b>						SERIAL NO.	FILING DATE			
						APPLICANT(S)				
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51			
2	/	/					52			
3							53			
4							54			
5							55			
6							56			
7							57			
8		/					58			
9							59			
10							60			
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40							90			
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42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.			➡			➡				
TOTAL DEP.			➡			➡				
TOTAL CLAIMS										

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS